Case 16-16173 Doc 1 Filed 05/12/16 Entered 05/12/16 15:49:59 Desc Main Page 1 of 53 Document is information to identify your case: ited States Bankruptcy Court for the: Northern District of Illinois Case number (If known): Chapter you are filing under: Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 Check if this is an amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a 12/15 joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Demetric government-issued picture identification (for example, First name First name your driver's license or passport). Middle name Middle name Renix Bring your picture identification to your meeting Last name with the trustee. Last name Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you n/a have used in the last 8 First name years Include your married or Middle name maiden names. Last name

(ITIN)

3. Only the last 4 digits of

your Social Security number or federal

Individual Taxpayer Identification number

- xx - <u>1</u> <u>3</u> <u>5</u> <u>2</u>

Middle name

Last name

First name

Middle name

Last name

OR

9 xx -- xx --

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Renix

First Name Middle	Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
<ul> <li>Any business names and Employer Identification Numbers</li> </ul>	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
(EIN) you have used in the last 8 years	n/a Business name	
Include trade names and	business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
		Lin
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	14028 South Atlantic Avenue Number Street	Number Street
	Riverdale, IL 60827	
	City State ZIP Code	City State ZIP Cod
	Cook County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	n/a	
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Vhy you are choosing	ствення в предоставления в предоста	
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Demetric

Debtor 1

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Debtor	1

Demetric L First Name Middle Name

L Renix

Case number (if known)\_

F	art 24 Tell the Court Abo	out Your	Bankru	ptcy Case				
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	are choosing to file under	☑ Chapter 7						
		Cha	apter 11					
		☐ Cha	apter 12	<u>.</u>				
thebara		☐ Cha	apter 13	1				
8.	How you will pay the fee	I ne App  I rea By I less pay	<ul> <li>I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).</li> <li>✓ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>					
9.	Have you filed for	<b>☑</b> No	PARTIE FILENDE I. IAM HALI	Andreas and the second of the second second second of the second second of the second	a Mahangan mengangkan dalam Lababad da Mamungan pengangkan da			
	bankruptcy within the last 8 years?	☐ Yes.	District		When	MM / DD / YYYY	Case number	
			District		When		Case number	
						MM / DD / YYYY		
			District		When	MM / DD / YYYY	Case number	
10.	Are any bankruptcy	☑ No	alle en l'engage page vesse i se autre l	A Madding Andrews (Andrews of Propagation (Andrews of				
	cases pending or being filed by a spouse who is	Yes.	Debtor				Relationship to you	
	not filing this case with						Case number, if known	
	you, or by a business partner, or by an affiliate?					MM / DD / YYYY		
			Debtor				Relationship to you	
			District		When		Case number, if known	
# <sub>2</sub> . 1. 1 a 1 a 1 a 1						MM / DD / YYYY	ida dakan pagan pagan pagan kan kan kan kan kan kan kan kan kan k	
	Do you rent your residence?	☐ No. ☑ Yes.	Go to lir Has you residend	ır landlord obtained	an eviction judgr	ment against you a	and do you want to stay in your	
				Go to line 12.				
				Fill out <i>Initial Stater</i> bankruptcy petition.		viction Judgment.	Against You (Form 101A) and file it with	

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e	ebtor 1	Demetric First Name Middle N	L	Renix Last Name			Ca	se number (# known	)	
				Cast Name				•		
l	art 3: . F	Report About Any	Busine	sses You Ov	vn as a :	Sole Propri	etor			
		a sole proprietor	· 🛮 No	. Go to Part 4.						
	of any f	ull- or part-time	□ Ye	s. Name and lo	ncation of	hueinace				
	A sole pro	oprietorship is a		ramo ana n	2000071 01	003111033				
	individual	you operate as an , and is not a		Name of busin	ness, if any					
	a corpora	legal entity such as tion, partnership, or		Number S	Street					
	LLC. If you hav	e more than one		rumber c	oneet					
	sole propi	rietorship, use a			1					
	to this pet	sheet and attach it ition.								
				City				State	ZIP Code	***************************************
				Check the ap	opropriate	box to descri	be your busine.	ss:		
				Health C	are Busin	ess (as define	ed in 11 U.S.C.	§ 101(27A))		
				☐ Single As	sset Real	Estate (as de	fined in 11 U.S.	C. § 101(51B))		
				☐ Stockbro	ker (as de	fined in 11 U.	S.C. § 101(53A	·))		
				☐ Commod	ity Broker	(as defined in	n 11 U.S.C. § 1	01(6))		
				☐ None of t						
are you a small business debtor? For a definition of small business debtor, see		☑ No.	I am not filing	under Ch	apter 11.		11 U.S.C. § 11		to the definition in	
	11 0.3.0.	§ 101(51D).		tne Bankrupto	by Code.					
			<b>∟</b> Yes.	I am filing und Bankruptcy C	ler Chapte ode.	er 11 and Ian	n a small busine	ess debtor acco	rding to the	definition in the
	t 4: Re	mont if Van Oran			_		_			
	340	port if You Own o	n nave	Any nazaro	ous Proj	perty or An	y Property T	nat Needs im	mediate	Attention
		wn or have any that poses or is	No No							
а	illeged to	pose a threat	TYes.	What is the h	nazard?					
	of immine	ent and le hazard to								
		alth or safety?				<u></u>				
C	Or do you	own any								
		hat needs attention?		If immediate	attention i	s needed, wh	y is it needed?			
F	or example	e, do you own								
ŀ	hat must be	goods, or livestock e fed, or a building urgent repairs?				ATTACAMAN AND AND AND AND AND AND AND AND AND A			4,4,4,4	
		gom ropana:		Where is the	nronortus					
				vincie la ule	hicheirà t	Number	Street			
										70 T0
						City			State	ZIP Code
						179			4000	ALT COUC

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Debtor 1

eme	tric	L	Rer
( Mame	1.7.4	alta bla	***************************************

Renix	
Last Nar	no.

C200	number		
∟ase	number	(if kanwn)	

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before ! filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing al	ooui
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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D	ebtor 1 Demetric First Name Middle Nar	L Renix	Case number (if known	
		SAMPLE SA		
	art 6: Answer These Que			
Ľ	Answer These Que	stions for Reporting Purposes	S	
16	3. What kind of debts do you have?	16a. <b>Are your debts primarily</b> as "incurred by an individual	y consumer debts? Consumer debts primarily for a personal, family, or house!	are defined in 11 U.S.C. § 101(8) nold purpose."
	•	<ul><li>No. Go to line 16b.</li><li>✓ Yes. Go to line 17.</li></ul>		
		16b. Are your debts primarily money for a business or inve	/ business debts? Business debts are street or through the operation of the bu	e debts that you incurred to obtain siness or investment.
		No. Go to line 16c. Yes. Go to line 17.		
		16c. State the type of debts you or	we that are not consumer debts or busine	ess debts.
17	. Are you filing under Chapter 7?	☐ No. I am not filing under Chap	oter 7. Go to line 18.	температура на принципални по принц
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expenses a	<ol> <li>Do you estimate that after any exempt are paid that funds will be available to dis</li> </ol>	property is excluded and tribute to unsecured creditors?
40	A the second second companies of which were decided as the contract of the con	$= -10^{-10}  \mathrm{GeV}$		
18.	How many creditors do you estimate that you owe?	<ul><li>1-49</li><li>50-99</li><li>100-199</li><li>200-999</li></ul>	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	How much do you estimate your liabilities to be?	<b>2</b> \$0-\$50,000 <b>□</b> \$50,001-\$100,000 <b>□</b> \$100,001-\$500,000 <b>□</b> \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pa	rt 7: Sign Below			
Fo	r you	I have examined this petition, and I correct.	declare under penalty of perjury that the	information provided is true and
		If I have chosen to file under Chapte of title 11, United States Code. I und under Chapter 7.	er 7, I am aware that I may proceed, if eli derstand the relief available under each o	gible, under Chapter 7, 11,12, or 13 chapter, and I choose to proceed
		If no attorney represents me and I d this document, I have obtained and	did not pay or agree to pay someone who read the notice required by 11 U.S.C. §	is not an attorney to help me fill out 342(b).
		I request relief in accordance with the	ne chapter of title 11, United States Code	, specified in this petition.
		I understand making a false stateme with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and	ent, concealing property, or obtaining mo infines up to \$250,000, or imprisonment fo 3571.	ney or property by fraud in connection or up to 20 years, or both.
		Signature of Debtor 1	Signature of	Debtor 2
		Executed on 05 // 2	QI/Q Executed on	MM / DD /YYYY

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				U	
Debtor 1	Demetric First Name	diddle Name	Renix		Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious acconsequences?  No Yes	tion with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or impriso No Yes	and that if your bankruptcy forms are ned?
Did you pay or agree to pay someone who is not an atte	orney to help you fill out your bankruptcy forms?
Yes. Name of PersonVeron	nica Eason laration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware to attorney may cause me to lose my rights or property if I	hat filing a bankruptcy case without an do not properly handle the case.
Signature of Debtor 1	Signature of Debtor 2
Date	Date MM / DD / YYYY
	Contact phone
Cell phone	Cell phone
Email address LINGULL BEGING OF	Email address

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Debtor 1	Demetric	L	Renix	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the: Northern District of	Illinois	Name of the last
Case number				
	(If known)			

Check if this is an amended filing

12/15

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

our original forms, you must fill out a new Summary and check the box at the top of this page.		o arter you me
art 1: Summarize Your Assets		
	Your as: Value of	sets what you own
Schedule A/B: Property (Official Form 106A/B)	•	0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B.	\$	5,278.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	5,278.00
	<u> </u>	
art 2: Summarize Your Liabilities		
	Your lia Amount	<b>bilities</b> you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$	16,159.00
Your total liabilities	\$	16,159.00
18 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,582.00

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De	btor	1

Demetric Renix Case number (if known)\_ First Name

P	art 4:	Answer These Questions for Administrative and Statistical Record	s	
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?		
	☐ No ☑ Ye	. You have nothing to report on this part of the form. Check this box and submit this s	form to the court with your othe	r schedules.
7.	What k	ind of debt do you have?	Baywaya magamagamagamagahagagagagaga kafa ada agama agama kafana (Salan a Chale a a ta a ta an an an an alaba d	et i Sandille, amendere en vez et transterioù titoù de vez anches trans cottat e propagitat a un a pa pa
	You fan	ur debts are primarily consumer debts. Consumer debts are those "incurred by an nily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purp	n individual primarily for a perso oses. 28 U.S.C. § 159.	onal,
	You this	ur debts are not primarily consumer debts. You have nothing to report on this par a form to the court with your other schedules.	rt of the form. Check this box ar	nd submit
8.	From t Form 1	the Statement of Your Current Monthly Income: Copy your total current monthly in 22A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	интернической положения по	\$1,582.00
9.	Copy th	ne following special categories of claims from Part 4, line 6 of Schedule E/F:	TRETAGNIS A. A.S. TO WARP OF PROPERTY CONTROL OF PRACTICAL CONTROL OF THE CONTROL	n tit en
			Total claim	
	From	Part 4 on Schedule E/F, copy the following:		
	9a. Don	nestic support obligations (Copy line 6a.)	\$0.00	
	9b. Tax	es and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
	9c. Clair	ms for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. Stuc	dent loans. (Copy line 6f.)	\$	
	9e. Oblig prior	gations arising out of a separation agreement or divorce that you did not report as rity claims. (Copy line 6g.)	\$0.00	
	9f. Debi	ts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00	
	9g. <b>Tota</b>	al. Add lines 9a through 9f.	\$0.00	
	······			

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600 pp. 200 pp. 100 pp	Document Page 10 01 53		
Fill in this information to identify your case and t	his filing:		
Domotrio			
Debtor 1 Demetric L  First Name Middle Name	Renix  Last Name		
Debtor 2			
Spouse, if filing) First Name Middle Name	Last Name		
Inited States Bankruptcy Court for the: Northern District	of Illinois		
ase number			
			Check if this is a
			amended filing
Official Form 106A/B			
Schedule A/B: Proper	4		
ochedule A/B: Proper	ty		12/15
art 1: Describe Each Residence, Building	more space is needed, attach a separate sheet to swer every question.  J. Land, or Other Real Estate You Own or Heest in any residence, building, land, or similar pr	lave an Interest In	any additional pages
☑ No. Go to Part 2.	oor in any residence, building, land, or similar pr	operty?	
Yes. Where is the property?			
, , , , , , , , , , , , , , , , , , , ,	What is the property? Check all that apply.		
4.4	☐ Single-family home		ed claims on Schedule D:
1.1. Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Cla	ims Secured by Property.
	Condominium or cooperative	Current value of the	
	Manufactured or mobile home     Land	entire property?	portion you own?
	☐ Investment property	\$	\$0.00
City State ZIP Code	- Timeshare	Describe the nature	
	Other	interest (such as fee the entireties, or a lif	
	Who has an interest in the property? Check on		,, -
	Debtor 1 only		
County	Debtor 2 only	Donation	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co	mmunity property
	Other information you wish to add about this	•	
	property identification number:	item, such as local	
f you own or have more than one, list here:			
	What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
1.2.	Single-family home	the amount of any secure Creditors Who Have Clair	
Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative		
	Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	☐ Land	\$ 0.00	\$ 0.00
	☐ Investment property	*	
City State ZIP Code	Timeshare	Describe the nature of interest (such as fee	
	Other	the entireties, or a life	
	Who has an interest in the property? Check one.		
	Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Check if this is co	
	At least one of the debtors and another	(see instructions)	ппишку ргорепу

property identification number: \_\_

Other information you wish to add about this item, such as local

Debtor :		6173	Doc 1 L	_Doeniment F	Entered 05/12/ Page 11 of 53 nt	'16 15:49: umber (if known)	:59 Desc	Main	
1.3.	Street address, if availa	able, or othe		Other	e it building coperative nobile home	the a Crea Curri entir  \$  Descripter the e	not deduct secured amount of any secu- litors Who Have Clivent value of the re property?  0.00  cribe the nature rest (such as ferentireties, or a limited amount of the control of the co	red claims of aims Secure  Curren portion  s  of your of esimple, t	n Schedule D: d by Property.  t value of the you own?  0.00  wnership enancy by
	County			Who has an interest  Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the d  Other information yo property identificatio	r 2 only ebtors and another u wish to add about t	(s	heck if this is c see instructions) th as local	ommunity	property
2. Add ti you h	ne dollar value of the ave attached for Part	portion y 1. Write t	ou own for a	Il of your entries from F here	Part 1, including any	entries for pa	ges	\$	0.00
Part 2:	Bescribe Vour	Vahiala	_						
you own t	vans, trucks, tractors	gal or equ es. If you l	i <b>table intere</b> s ease a vehicl	st in any vehicles, whet e, also report it on <i>Sched</i> , motorcycles	her they are registere	ed or not? inc racts and Une	lude any vehicle expired Leases.	s	
Do you o' you own t  3. Cars, ' No 2 Ye.  3.1.	wn, lease, or have leg hat someone else drive vans, trucks, tractors	gal or equ es. If you l	itable interesease a vehicles ility vehicles	e, also report it on <i>Sched</i>	ule G: Executory Cont  the property? Check	one. Do not the ame Credito	deduct secured cla ount of any secure rs Who Have Clain nt value of the property?	nims or exem d claims on 3 ns Secured b	Schedule D: by Property. Value of the rou own?
Do you o' you own t  3. Cars, ' No 2 Ye.  3.1.	wn, lease, or have leghat someone else drive vans, trucks, tractors s Make: Model: Year: Approximate mileage:	Pontiac Grand 2008	itable interesease a vehicles ility vehicles	who has an interest in Debtor 2 only Debtor 1 and Debtor 2	tule G: Executory Cont  the property? Check  only btors and another	one. Do not the amo Credito  Currel entire	deduct secured cla ount of any securer rs Who Have Claim nt value of the	nims or exem d claims on 3 ns Secured E Current v	Schedule D: by Property. Value of the
Do you or you own to 3. Cars, to 1. No 1. Yes 3.1.  If you o 3.2. Many A	wn, lease, or have leghat someone else drive vans, trucks, tractors s Make: Model: Year: Approximate mileage:	Pontiad Grand 2008	itable interesease a vehicles ility vehicles	who has an interest in Debtor 2 only Debtor 1 and Debtor 2 At least one of the del	the property? Check only the property? Check the property? Check of	one. Do not the amount the amount of the amo	deduct secured cla ount of any secure rs Who Have Clain nt value of the property?	ms or exemple to the control of the	Schedule D: by Property.  Value of the rou own?  2,878.00  ptions. Put chedule D: y Property.  alue of the

	Demetric First Name Middle Name	Doc 1 Filed 05/12/16 Entered 05/12/16 1 L Dominment Page 12 of 53 number of the control of the	15.49.59 Desc	c Main
3.3.	Make:	Who has an interest in the property? Check one.		
	Model:	Debtor 1 only  Debtor 2 only	the amount of any sec	d claims or exemptions. Put cured claims on <i>Schedule D.</i> Claims Secured by Property.
	Year: Approximate mileage:	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Current value of the entire property?	he Current value of the portion you own?
	Other information:	☐ Check if this is community property (see instructions)	\$	0.0
3.4,	Make:	Who has an interest in the property? Check one.	Do not deduct secured	f claims or exemptions. Put
	Model: Year:	Debtor 1 only Debtor 2 only	the amount of any sec	ured claims on Schedule D: claims Secured by Property.
	Approximate mileage:	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Current value of th entire property?	ne Current value of the portion you own?
[	Other information:	Check if this is community property (see instructions)	\$0.00	0.00
Yes				
4.1. N N Y	Make:Model: /ear:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any secu Creditors Who Have Cla	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. e Current value of the portion you own?
4.1. N N Y	Make: Model: 'ear:	☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ Debtor 1 and Debtor 2 only	the amount of any secu Creditors Who Have Cla Current value of the	red claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
4.1. M Y	Make: Model: 'ear:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	the amount of any secu Creditors Who Have Cla Current value of the entire property?	red claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
4.1. M Y C If you ov 4.2. M Ye	Make:  Model:  Year:  Other information:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Current value of the entire property?  \$ 0.00  Do not deduct secured of the amount of any secur Creditors Who Have Cla	red claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
4.1. M Y C If you ov 4.2. M Ye	Make:  Model:  Year:  Other information:  Wh or have more than one, list have:  lake:  lodel:  ear:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  ere:  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?  \$ 0.00  Do not deduct secured of the amount of any secur Creditors Who Have Cla	red claims on Schedule D: aims Secured by Property.  Current value of the portion you own?  \$ 0.00  claims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?

Debtor 1

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**Describe Your Personal and Household Items** 

	o you own or have any legal or equitable interest in any of the following items?	portion	value of the you own?
6.	Household goods and furnishings	or exempt	ions.
	Examples: Major appliances, furniture, linens, china, kitchenware		
	O No		
	Yes. Describe Furniture	\$	400.00
7		Φ	700.00
1.	Electronics  Example of Tabletic Control of the Con		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	<b>☑</b> No		
	Yes. Describe		0.00
		\$	0.00
8.	Collectibles of value		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	☐ Yes. Describe.	Prince Philadelphia.	
		\$	0.00
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	☑ No	70.00	
	Yes. Describe	\$	0.00
• • •			
	Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  ☑ No		
	✓ No  ☐ Yes. Describe	\$	0.00
1.4	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No		
	Yes. Describe Clothes	\$	500.00
2. ᢏ	lewelry		
ı	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	No.	anny.	
- [	Yes. Describe	\$	0.00
,			
	Ion-farm animals		
3. <b>N</b>	Examples: Dogs, cats, birds, horses		
3. N			
3. N	Z No  2 Yes. Describe	\$	0.00
3. N	Z No	\$	0.00
3. <b>N</b>	A No  Yes. Describe	\$	0.00
3. <b>N</b>	No  Yes. Describe  ny other personal and household items you did not already list, including any health aids you did not list  No  Yes. Give specific	770	
3. <b>N</b>	A No  Yes. Describe	\$	0.00

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## **Describe Your Financial Assets**

	ny legal or equitable interest in any of the following?		portion	value of the you own? duct secured clain ions.
6. Cash Examples: Manager	u hava ta va			
No No	u have in your wallet, in your home, in a safe deposit box, and on hand	d when you file your petition		
		Cash:	\$	0.00
	savings, or other financial accounts; certificates of deposit; shares in c similar institutions. If you have multiple accounts with the same institut	credit unions, brokerage houses, ion, list each.		
No Yes				
, 63	Institution name:			
	17.1. Checking account:		\$	0.00
	17.2. Checking account:		\$	0.00
	17.3. Savings account:		\$	0.00
	17.4. Savings account:		φ	0.00
	17.5. Certificates of deposit:		Ψ <b>¢</b>	1,500.00
	17.6. Other financial account:		\$	0.00
	17.7. Other financial account:		\$	0.00
	17.8. Other financial account:		\$	0.00
	17.9. Other financial account:			0.00
			Ψ	
Bonds, mutual funds	or publicly traded stocks			
☑ No	investment accounts with brokerage firms, money market accounts			
☐ Yes	Institution or issuer name:			
			\$	0.00
			<b>.</b>	0.00
			\$	0.00

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20. Government and cor	porate bonds and o	ther negotiable and non-negotiable instruments		
Negotiable instrument	s include personal ch	necks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.		
☑ No				
☐ Yes. Give specific	Issuer name:			
information about them			\$	0.0
			\$	0.00
	the state of the s		\$	0.00
21 Patiroment as newsta				
21. Retirement or pension Examples: Interests in	n accounts IRA, ERISA, Keogh.	401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
<b>☑</b> No	,, <b></b>	to ((k), 100(b), think savings accounts, or other pension or profit-sharing plans		
Yes. List each				
account separately.	Type of account:	Institution name:		
	401(k) or similar plan	E	\$	0.00
	Pension plan:		ς.	0.00
	IRA:		Φ	0.00
	Retirement account:		\$	0.00
			\$	***************************************
	Keogh:		\$	0.00
	Additional account:		\$	0.00
	Additional account:		\$	0.00
Examples: Agreements companies, or others	with landlords, prepa	made so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications		
☐ No				
<b>2</b> Yes	In	stitution name or individual:		
	Electric:		\$	0.00
	Gas:		\$	0.00
	Heating oil:		\$	0.00
	Security deposit on re-	ntal unit: Crescent Real-Estate Management	\$	1,500.00
	Prepaid rent:		\$	0.00
	Telephone:		\$	0.00
	Water:		\$	0.00
	Rented furniture:		\$	0.00
	Other:		\$	0.00
23. Annuities (A contract for	a periodic payment of	of money to you, either for life or for a number of years)		
☑ No				
☐ Yes	Issuer name and des	cription:		
			\$	0.00
			\$	0.00
			\$	0.00

Case 16-16173 Doc 1 Filed 05/12/16 Entered 05/12/16 15:49:59 Decument Page 16 of 33 number (# known) Demetric Debtor 1 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **2** No 0.00 0.00 0.00 0.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **1** No Yes. Give specific information about them., 0.00 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ✓ No ☐ Yes. Give specific information about them... 0.00 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them .... 0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No. Yes. Give specific information 0.00 Federal: about them, including whether you already filed the returns 0.00 State: and the tax years. .... 0.00 Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☑ No ☐ Yes. Give specific information..... 0.00 Alimony: 0.00 Maintenance: 0.00 Support: 0.00 Divorce settlement: 0.00 Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☐ Yes. Give specific information.....

**2** No

0.00

Debtor 1	Case 16-16173 Demetric First Name Middle Name	Doc 1 Filed 05/12		Desc Main
	ts in insurance policies es: Health, disability, or life in	nsurance; health savings accor	unt (HSA); credit, homeowner's, or renter's insurand	ce
☐ Yes	. Name the insurance compa of each policy and list its val	ny Company name:	Beneficiary:	Surrender or refund value:
				s 0.00
				2.00
				\$\$
If you ar	erest in property that is due e the beneficiary of a living tr because someone has died.	e you from someone who ha ust, expect proceeds from a lif	s died fe insurance policy, or are currently entitled to recei	ve
Yes.	Give specific information		and the Golden was a suggested and a construct and and the first of the constitution o	\$ 0.00
33 Claims	against third parties, whath			AND THE RESIDENCE OF THE PARTY
Example	s: Accidents, employment dis	er or not you nave filed a lav sputes, insurance claims, or riç	wsuit or made a demand for payment ghts to sue	
<b>☑</b> No		TO COMPANY AND A STATE OF THE S		
<b>□</b> Yes.	Describe each claim			• 0.00
34. Other co	ntingent and unliquidated	claims of every nature inclu	ding counterclaims of the debtor and rights	\$
to set of No	f claims		only counterclaims of the debtor and rights	
Yes.	Describe each claim			0.00
		And the control of the control of the state of the control of the		\$
or Anicema	anial acceptance in the second			
35. Any final	ncial assets you did not alm	eady list		
	Give specific information	An automate spars of a stress way when the registry of a globy on the fact of the stress way when the residency of the stress to the stress of		0.00
	,	1		<b>\$</b> 0.00
36. Add the	dollar value of all of your e	ntries from Part 4, including	any entries for pages you have attached	s 1,500.00
				•
Part 5:	Describe Any Busine	ss-Related Property Y	ou Own or Have an Interest In. List a	ny real estate in Part 1.
		uitable interest in any busine		
	o to Part 6.	made ancrest in any busine	ess-related property?	
Yes. 0	So to line 38.			
				Current value of the
				portion you own?  Do not deduct secured claims
				or exemptions.
	receivable or commissions	s you already earned		
No No	Pescribe			11.0000010 ac 30.00
⊶uares,L	/escribe			\$0.00
	Lipment, furnishings, and s Business-related computers, soft		ax machines, rugs, telephones, desks, chairs, electronic de	evices
No No	, ,			
Yes. D	escribe	erentistik in 1990 (1990) (1990) (1990) (1990) (1990) (1990) (1990) (1990) (1990) (1990) (1990) (1990) (1990)		\$0.00
		министинания изменьный профессору профессору профессору профессору профессору профессору профессору профессору 		Posteriorani

Debtor 1 Cas Deme First Nam	PARMINITELL FORETONISS	Desc Main	
(0.84)			
40. Machinery, fixtur	es, equipment, supplies you use in business, and tools of your trade		
Yes. Describe		ANNONAMA Angunga ang	
		\$	0.00
41. Inventory		- Statistististissing poli	
<b>☑</b> No			
Yes. Describe		\$	0.00
42. Interests in partn	erships or joint ventures		
	Name of entity: % of ownershir		
		\$	0.00
	%	\$ \$	0.00
42 Swatana a 15-4-		Ψ	
No No	ailing lists, or other compilations		
Yes. Do your l	ists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
☐ No			
☐ Yes. [	escribe	\$	0.00
44. Any business-rela	ted property you did not already list		
Yes. Give spec	fic		0.00
information		\$	0.00
		\$	0.00
		\$	0.00
		\$	0.00
		\$	0.00
		\$	0.00
45. Add the dollar value for Part 5. Write th	e of all of your entries from Part 5, including any entries for pages you have attached at number here	ss	0.00
100 0 200 0 200 00			
Part 6: Describe	Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest or have an interest in farmland, list it in Part 1.	In.	
46. Do vou own or hav	e any legal or equitable interest in any farm- or commercial fishing-related property?	<del></del>	
No. Go to Part 7	•		
Yes. Go to line	7.		
		Current value portion you ov	
		Do not deduct se	
47. Farm animals		or exemptions.	
	, poultry, farm-raised fish		
No No			
☐ Yes			<b>.</b>
		\$	0.00

	ment Page 19 c	05/12/16 15:49:59 D of 53 case number (# known)	esc Main	
48. Crops—either growing or harvested				
☑ No				
Yes. Give specific information				0.00
49. Farm and fishing equipment, implements, machinery, fixt	ures, and tools of trade		\$	0,00
Yes				
50. Farm and fishing supplies, chemicals, and feed			\$	0.00
☑ No				
Yes	COLLEGE TO THE SECTION OF THE SECTIO	BRANTON OF THE		
			\$	0.00
51. Any farm- and commercial fishing-related property you di	d not already list		ra-thomps,i	
Yes. Give specific information			\$	0.00
52. Add the dollar value of all of your entries from Part 6, inclifor Part 6. Write that number here	uding any entries for name	S VOII have attached	\$	0.00
		<b>→</b>		
Yes. Give specific information			\$ \$ \$	0.00 0.00 0.00
54. Add the dollar value of all of your entries from Part 7. Write			\$	0.00
Part 8: List the Totals of Each Part of this For	m			
55. Part 1: Total real estate, line 2		<b>→</b>	\$	0.00
56.Part 2: Total vehicles, line 5	\$2,878.00	) -		
57. Part 3: Total personal and household items, line 15	\$900.00			
58. Part 4: Total financial assets, line 36	\$1,500.00	-		
9. Part 5: Total business-related property, line 45	\$0.00	-		
0. Part 6: Total farm- and fishing-related property, line 52	\$0.00			
61. Part 7: Total other property not listed, line 54	<b>+</b> \$0.00			
2. <b>Total personal property.</b> Add lines 56 through 61	\$5,278.00	Copy personal property total 👈	+\$	5,278.00
3. Total of all property on Schedule A/B. Add line 55 + line 62			\$	5,278.00

Case 16-16173 Doc 1 Filed 05/12/16 Entered 05/12/16 15:49:59 Desc Main Page 20 of 53 Document Fill in this information to identify your case: Demetric Renix Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an (If known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: **Identify the Property You Claim as Exempt** 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief 735 ILCS 5/12-1001(c) <u>Automobile</u> \$2,878.00 □ \$ 2,878.00 description: 100% of fair market value, up to Line from 3.1 any applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(a) <u>Furniture</u> \$500.00 **☑** \$ 500.00 description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) Clothes \$500.00 **☑** \$ 500.00 description: ☐ 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) ☑ No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Debtor 1

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Case number (# known) Decyment Demetric

I	2	-	1	2	ı

### **Additional Page**

on Schedule	ion of the property and line 4/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Security Deposit	\$1,500.00	<b>☑</b> \$1,500.00	735 ILCS 512-1001(b)
Line from Schedule A/B:	22		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B:			100% of fair market value, up to	
Brief description:		\$	<b>D</b> \$	***
Line from Schedule A/B:	William		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>0</b> \$	en e
Line from Schedule A/B:	1847		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B: -	w		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit _	
Brief description: -		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit _	
Brief description: —			<b>Q</b> \$	
Line from Schedule A/B: —			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description; —		\$I	<b>□</b> \$	
ine from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

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Debtor 1	Demetric	L	Renix	
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse, if filing)	First Name	Middle Name	Last Name	***************************************
Jnited States B	ankruptcy Court for t	he: Northern District of	f Illinois [	<b>Y</b>

☐ Check if this is an amended filing

#### Official Form 106D

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

for each claim. If more than one creditor As much as possible, list the claims in alp	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
<sup>2.1]</sup> n/a	Describe the property that secures the claim:	s 0.00	\$ 0.00	0.00
Creditor's Name				
Number Street	_	THE STATE OF THE S		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
n/a Creditor's Name	Describe the property that secures the claim:	\$	\$	0.00
Number Street				
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			

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Fill in this	s information to identil	y your case:							
Debtor 1	Demetric	L	Re	enix					
	First Name	Middle Name	Last N						
Debtor 2 (Spouse, if fill	ing) First Name	Middle Name	Last N	ama.	<u>.</u>				
Inited State	es Bankruptcy Court for the			, ,					
		: Nonnem District	of Illinois						,
Case numb (If known)	er		The state of the s					Check if the companies of the compani	
Official	Form 106E/F		.,						-
Sched	dule E/F: Cr	- editors V	Vho Hav	e Unse	cured Clai	ms		,	12/15
A/B: Proper creditors w needed, cop any addition	er party to any execut er party to any execut ty (Official Form 106A ith partially secured cl by the Part you need, t nal pages, write your r	ory contracts or I/B) and on Scheo aims that are list ill it out, number lame and case no	unexpired lease dule G: Executo ed in Schedule the entries in t umber (if know	es that could re bry Contracts ar D: Creditors W he boxes on the	sult in a claim. Also nd Unexpired Leases the Have Claims Sec	list exec (Official	utory contra Form 106G)	cts on <i>Schedu</i> . Do not includ	<i>ile</i> de any
	List All of Your PRIC							·	
	creditors have priority Go to Part 2.	unsecured claim	is against you?						
2. List all c each clai nonpriori unsecure	of your priority unsecum listed, identify what ty amounts. As much as d claims, fill out the Cor	/pe of claim it is. If s possible, list the ntinuation Page of	a claim has bot claims in alphab Part 1. If more t	h priority and nor etical order acco han one creditor	npriority amounts, list in ording to the creditor's inholds a particular clai	that claim	here and sho	ow both priority	and
(For an e	explanation of each type	of claim, see the i	instructions for the	his form in the in:	struction booklet.)	asan salahasan	en e	myskaker of dekenin Mokestur	managga ya cosa c
						Total		The state of the s	npriority ount
2.1								***************************************	
Priority Cr	editor's Name		Last 4 digits	of account numb	oer	\$	0.00 \$	0.00 \$	0.00
Number	01		When was the	e debt incurred?	manufacture and the state of th				
Mumber	Street			•••					
				· = '	im is: Check all that app	ły.			
City	State	ZIP Code	Contingent Unliquidate						
	<b>curred the debt?</b> Check o	ne.	Disputed	:u					
	or 1 only								
Debt	or 2 only or 1 and Debtor 2 only			RITY unsecure	d claim:				
	or if and Deotor 2 only ast one of the debtors and a	another		upport obligations					
	ck if this claim is for a c				you owe the government	:			
		ommunity dept		death or personal ir	njury while you were				
is the cl	aim subject to offset?		intoxicated  Other Sper	>i6√					
Yes									
2	ethetia setterittete terrim tet i siemide 40-e sillest betävisidend, heluesidand sekrepanys despusys optibili	Manus Andrews (Angresia) (2) spends (A) the spin (cycles and cycles and angress) and			A. C.		^ ^^		
	editor's Name		Last 4 digits of	f account numb	er	\$	0.00 \$		0.00
			When was the	debt incurred?					
Number	Street		An af the data						
***************************************				you me, the clai	m is: Check all that appl	у.			
City	State	ZIP Code	Contingent Unliquidated	ı.					
			Disputed	a.					
Who inc	urred the debt? Check or or 1 only	ne.	•						
Debto	•			RITY unsecured	d claim:				
	r 1 and Debtor 2 only			pport obligations					
	st one of the debtors and a	nother			you owe the government				
Chec	k if this claim is for a co	mmunity debt	Claims for d	eath or personal in	jury while you were				
	im subject to offset?	-		ifv					
□ No	oubjout to onset?		_ Onler, opec	·· 5		-			
Yes									

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Demetric
First Name

Last Name

Last Name

Last Name

Case number (if known)

Case number (if known)

De	First Name Middle Name	Last Na	ren Inte	Case number (if known)	***************************************			
Pa	art 2: List All of Your NONPRIC			ns				
3	Do any creditors have nonpriority t	IRA S OLLEG d						
	No. You have nothing to report in Yes							
4.	monphorny unaccured claim, ist the ci	editor hold	araieiv ior each cia	al order of the creditor who holds each claim. If a creditor ha aim. For each claim listed, identify what type of claim it is. Do no n, list the other creditors in Part 3.If you have more than three no	4 11 - 4 - 1 2			
1	Dish Network				Tota	l claim		
	Nonpriority Creditor's Name			Last 4 digits of account number 1 3 5 2	¢	342.00		
	9601 Meridan Blvd			When was the debt incurred? 01/28/2016	Φ			
	Carol Stream	IL	80112					
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one.  Debtor 1 only			Contingent Unliquidated Disputed				
	Debtor 2 only							
	Debtor 1 and Debtor 2 only  At least one of the debtors and anothe	_		Type of NONPRIORITY unsecured claim:				
				Student loans				
	Check if this claim is for a commi	unity debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>				
	is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	ŝ			
	Yes			₩ Other. Specify Cable				
2	Cook Magchic	ter kansion toksinkik vitoriilin ki kangain	1000 2001 TO A TO THE GOOD A SECURE ACCORDING TO A TO THE GOOD ACCORDING TO THE SECURE ACCORDING TO THE SECURE	Last 4 digits of account number $\begin{array}{cccccccccccccccccccccccccccccccccccc$	\$	2,600.00		
	Nonpriority Creditor's Name			When was the debt incurred? 05/01/2016	¥			
	50 W. Washington Street Roo	m 1 Rich	nard J Daley					
	Number Street Chicago	IL	60602	As of the date you file, the claim is: Check all that apply.				
	City	State	ZIP Code	Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only			☐ Disputed				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another			☐ Student loans				
	Check if this claim is for a commu	nity debt		Obligations arising out of a separation agreement or divorce				
	Is the claim subject to offset?			that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts				
	☑ No			Other Specify Circuit Court 10M1179755				
			National Confession of State Confession of the State Confession of		\$400-73-7000-74-X000-704 <b>0</b>	el 186, Will blokken silven evrosen løv. v transkanne		
	Cook Magmark			Last 4 digits of account number 1 3 5 2	_	2,147.00		
	Nonpriority Creditor's Name			When was the debt incurred? 05/01/2016	\$	2,147.00		
	16501 S. Kedzie Ave Room 11	19		<b>.</b>				
	Markham	IL	60426	- As of the date you file, the claim is: Check all that apply.				
	City	State	ZIP Code	☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only Debtor 2 only			☐ Disputed				
	Debtor 1 and Debtor 2 only			Type of NONDDIODITY ungrouped alaims				
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a commun	nity debt		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	is the claim subject to offset?							
	₩ No			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Circuit Court 15M6005091		77		

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Debtor 1

Demetric	

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Afi	ter listing any entries on this page, r	number the	em beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim
4.4	Chara Bauti			1 2 5 3	
	Chase Bank Nonpriority Creditor's Name			Last 4 digits of account number 1 3 5 2	\$ 500.00
	92 E. 103rd Street			When was the debt incurred? 05/01/2016	
	Number Street Chicago	IL.	60628	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.  Debtor 1 only			Unliquidated Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	or.		Student loans	
	☐ Check if this claim is for a comm			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?	-		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card	
	☑ No ☐ Yes				
1.5	Bank of America	PT No. of St. 1944 (See and any language co. 1555 acres 1945)	TO THE STATE OF TH	Last 4 digits of account number 1 3 5 2	\$ 500.00
	Nonpriority Creditor's Name			When was the debt incurred? 05/01/2016	<u> </u>
	P.O. Box 15168 Number Street				
	Wilmington City	DE	19850	As of the date you file, the claim is: Check all that apply.	
	•	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and anothe			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a commust the claim subject to offset?	inity debt		Debts to pension or profit-sharing plans, and other similar debts	
	✓ No  ☐ Yes			☑ Other. Specify Credit Card	
.6		oral transport or the entire two visities and finishes be	2.20.000.90.12.000的复数数据的1965255623900的重要存在500000-4005200的转移管理。如何		s 630.00
	Comcast Nonpriority Creditor's Name			Last 4 digits of account number 1 3 5 2	
	P.O. Box 6111			When was the debt incurred? 05/01/2016	
	Number Street Southeastern	PA	19398	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other, Specify Cable	
	Yes				

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Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this pag	e, number the	em beginning wi	th 4.4, followed by 4.5, and so forth.	Total cl
DirecTV			Last 4 digits of account number 1 3 5 2	s 30
Nonpriority Creditor's Name P.O. Box 9001069			When was the debt incurred? 05/01/2016	\$
Number Street Louisville	KY	40290	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Confingent	
Who incurred the debt? Check on	a.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
<ul><li>Debtor 1 and Debtor 2 only</li><li>At least one of the debtors and an</li></ul>	other		Student loans	
☐ Check if this claim is for a col			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
is the claim subject to offset?	nmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
<b>☑</b> No			☑ Other. Specify Cable	
☐ Yes	on the second			
PLS			Last 4 digits of account number 1 3 5 2	s_ 70(
Nonpriority Creditor's Name			When was the debt incurred? 05/01/2016	
1431 Obama Drive			when was the dept incurred?	
Calumet Park		60827	As of the date you file, the claim is: Check all that apply.	
Cily	State	ZIP Code	Contingent	
Who incurred the debt? Check one	•		☐ Unliquidated ☐ Disputed	
Debtor 1 only			_ Cispated	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and and	ither		Student loans	
☐ Check if this claim is for a con			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offset?	mainty debt		Debts to pension or profit-sharing plans, and other similar debts	
No			☑ Other, Specify Loan	
Yes				
Sprint Wireless	grigoria com de mais profesio de la 1885 de mais profesio de 1885 de 1885 de 1885 de 1885 de 1885 de 1885 de 1	angan ng nguyang ng ng	Last 4 digits of account number 1 3 5 2	\$230
onpriority Creditor's Name			When was the debt incurred? 05/01/2016	
i391 Sprint Parkway  umber Street			***	
Overland Park	KS	66251	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	□ Contingent □ Unliquidated	
/ho incurred the debt? Check one.			☐ Disputed	
Debtor 1 only			·	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and anot	her		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
Check if this claim is for a com	munity debt		you did not report as priority claims	
the claim subject to offset?	y ucut		Debts to pension or profit-sharing plans, and other similar debts	
No			☑ Other Specify Cellular Phone	
Yes				

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Part 2:

## Your NONPRIORITY Unsecured Claims - Continuation Page

	ge, number them beginni	ng with 4.4, followed by 4.5, and so forth.	Total claim
.0 T-mobile		Last 4 digits of account number 1 3 5 2	s 500.00
Nonpriority Creditor's Name P.O. Box 53410		When was the debt incurred? 05/01/2016	Ψ
Number Street Bellevue	WA 98015	As of the date you file, the claim is: Check all that apply.	
City  Who incurred the debt? Check o  Debtor 1 only	State ZIP Code ne.	Contingent Unliquidated Disputed	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a	enother	Type of <b>NONPRIORITY</b> unsecured claim:	
☐ Check if this claim is for a coll is the claim subject to offset?  ☑ No ☐ Yes		<ul> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify Cellular Phone</li> </ul>	
1 City of Chicago Departme	ent of Finance	Last 4 digits of account number 1 3 5 2	\$310.00
P.O. Box 4641		When was the debt incurred? 05/01/2016	
Number Street Chicago	IL 60680	As of the date you file, the claim is: Check all that apply.	
City	State ZiP Code	☐ Contingent	
Who incurred the debt? Check or Debtor 1 only	ne.	<ul><li>Unliquidated</li><li>Disputed</li></ul>	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a	nother	Type of <b>NONPRIORITY</b> unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a cols the claim subject to offset? ☑ No ☐ Yes	ommunity debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Tickets	
City of Country Club Hills	t en der stelle der Stellende Geldelicher der einstelle der einstellt versienste, deut erste stelle bezonstell	Last 4 digits of account number 1 3 5 2	\$ 200.00
Nonpriority Creditor's Name 4200 W. Main Street		When was the debt incurred? 05/01/2016	
Number Street Country Club Hills	IL 60478	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check on	e.	☐ Disputed	
Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		☐ Student loans	
At least one of the debtors and ar		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a collist the claim subject to offset?	mmunity debt	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Ticket	
✓ No  Yes		Other, opening a longer	

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Demetric	

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Part 2:

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r listing any entries on this pa	age, number th	em beginning wi	th 4.4, followed by 4.5, and so forth.	Total c
Village of Riverdale			Last 4 digits of account number 1 3 5 2	s 20
Nonpriority Creditor's Name 157 W. 144th Street			When was the debt incurred? 05/01/2016	<u> </u>
Number Street Riverdale	IL.	60827	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check o			Unliquidated	
Debtor 1 only	one,		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and a	another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
Check if this claim is for a c	ommunity debt		you did not report as priority claims	
s the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts	
☑ No			☑ Other. Specify Tickets	
☐ Yes				
<sup>⊃</sup> eople Gas		y retain mandre can vois promisses president mension promisses per established and considerate designation of the considerat	Last 4 digits of account number 1 3 5 2	\$_2,00
lonpriority Creditor's Name			When was the debt incurred? 05/01/2016	
200 E. Randolph Street			when was the debt incurred?	
Chicago	IL	60601	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
Vho incurred the debt? Check or	ne		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
the claim subject to offset?	•		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Utilities	
☑ No ☑ Yes			Other. Specify Otheries	
1 Yes	ervenstraktortiikku viiteilikkilikkikki ka-tatiikkulainiin	dan salaharan dan salah dan salah		* 2,00(
omEd			Last 4 digits of account number 1 3 5 2	5
onpriority Creditor's Name  2.0. Box 6111  Limber Street	***************************************		When was the debt incurred? 05/01/2016	
umber Street Sarol Stream	IL	60197	As of the date you file, the claim is: Check all that apply.	
ly .	State	ZIP Code	Contingent	
/ho incurred the debt? Check on	<u>م</u>		Unliquidated	
Debtor 1 only	Nes.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and ar	other		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
the claim subject to offset?	•		<ul> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other Specify Utilities</li> </ul>	
I No			uner. Specify Otheres	
Yes				

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Debtor 1

Demetric

Case number (if known)\_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

	er listing any entries on this page, number	them beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
5.6	Crescent Real-Estate Management		Last 4 digits of account number 1 3 5 2	<sub>\$</sub> 3,000.00
	3461 Funtuna Street Port Street		When was the debt incurred? 05/01/2016	
	Number Street Lucie FL	34953	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community de	bt	you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts  Other, Specify Landlord Dave Ramporsaud	
	₩ No		Onler, specify Landrold Dave (Kamporsaud	
	Yes			
.7	N/A	Antibachinak kelantihak dan eti menjadi seretia sereka disaktika Mantibal perak pan tituta Kampandi	Last 4 digits of account number	
	Nonpriority Creditor's Name		Adverse	9
			When was the debt incurred?	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
			☐ Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only		_	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another		☐ Student loans	
	☐ Check if this claim is for a community deb		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	•	ot .	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other, Specify	
	□ No □ Yes			
8		to the particular designation of the designation of the contract of the contra		intaniorraphipora humanaphapatataphapatatatataphapatatatataphapatatatat
	N/A Nonpriority Creditor's Name		Last 4 digits of account number	
			When was the debt incurred?	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only Debtor 2 only		Town of MONDPIODITY	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans     Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debi	•	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
		L	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify	!
	☑ No ☑ Yes			İ

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Debtor 1

Demetric

Case number (if known)\_

Part 3:

List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. **ERC** On which entry in Part 1 or Part 2 did you list the original creditor? P.O. Box 57547 Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 1 3 5 2 **Jacksonville** FL 32241 City State ZIP Code N/A On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Last 4 digits of account number \_\_\_\_ \_\_\_ City ZIP Code N/A On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_ \_\_ City State ZIP Code N/A On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_\_ \_\_\_ City State ZIP Code N/A On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_ \_\_ City State ZIP Code N/A On which entry in Part 1 or Part 2 did you list the original creditor? Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_\_ \_\_\_ State City ZIP Code N/A On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims

City

State

ZfP Code

Last 4 digits of account number \_\_\_\_ \_\_\_

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Debtor 1

Demetric

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a.	Domestic support obligations	6a.	\$	0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ §	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f.	Student loans	6f.	Total claim	0.00
Total claims from Part 2	6g.	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	Total claim	0.00
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority		Total claim  \$ \$ \$	
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	6g.	**************************************	0.00

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Debtor	Demetric	L	Renix		
	First Name	Middle Name		Las! Name	
Debtor 2					
(Spouse If filing)	First Name	Middle Name		Last Name	
United States E	Bankruptcy Court fo	or the: Northern Distric	t of Illinois		
Case number					
(If known)					

#### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

		n company w	iiii whom you	nave the contract of le	ease State what the contract or lease is for
2.1	Cresce	nt Real-Est	ate Manage	ement	Residential yearly lease
	Name	S. Atlantic /			
	Number Riverda	Street	IL	60827	
Instruction	City	Whiteless were the construct of the latest o	State	ZIP Code	Minimum — — — — — — — — — — — — — — — — — —
2.2			and an annual state of the stat	er Standing Shangaran proposition for the contract and another for the Standing of the Contract of the Contrac	
	Name	· · · · · · · · · · · · · · · · · · ·			
	Number	Street			
ontanas esp	City	TO STEED ASSESSMENT OF THE STE	State	ZIP Code	
2.3	***				
	Name				
	Number	Street			
.co.xexex.	City	12 Aller (1982)	State	ZIP Code	
2.4					
renewer were?	Name				
	Number	Street		***************************************	
Delatanjan	City	70.0 N.O. A. OPER PETER AND PROPERTY OF STREET, SANS AND	State	ZIP Code	
2.5					
an an an an a	Name				
	Number	Street	· · · · · · · · · · · · · · · · · · ·		
	City		State	ZIP Code	White the second

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Debtor 1	Demetric	L	Renix	
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse, if filing	ng) First Name	Middle Name	Last Name	
Jnited State	s Bankruptcy Court for t	he: Northern District of II	linois	$\Xi$

☐ Check if this is an amended filing

## Official Form 106H

## **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the Check all schedules that apply:  n/a  Name  Schedule D, line  Schedule E/F, line  City  State  ZIP Code  City  Street  Schedule D, line  Schedule G, line	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?   No	
No   Yes. In which community state or territory did you live? Fill in the name and current address of that person.   Name of your spouse, former spouse, or legal equivalent	No   Yes. In which community state or territory did you live?	
Yes. In which community state or territory did you live?	Yes. In which community state or territory did you live?	
Number Street  City State ZIP Code  In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the Check all schedules that apply:    D/A	Name of your spouse, former spouse, or legal equivalent    Number   Street	
Number Street  City State ZIP Code  In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the Check all schedules that apply:    D/A   Schedule D, line   Schedule E/F, line   Schedule G, line   Schedule G, line   Schedule D, line   Schedule D, line   Schedule E/F, line   Schedule G,	Number Street  City State ZIP Code  In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the credito Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you have listed that apply:  \[ \begin{array}{cccccccccccccccccccccccccccccccccccc	e person
In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the Check all schedules that apply:    Dia	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List it shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the credito Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom your check all schedules that apply:  \[ \begin{array}{cccccccccccccccccccccccccccccccccccc	: person
n Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the Check all schedules that apply:  \[ \begin{array}{cccccccccccccccccccccccccccccccccccc	n Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the credito Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you have listed to the creditor to whom you have listed to the creditor	: person
shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the Check all schedules that apply:  n/a  Name  Schedule D, line  Schedule E/F, line  City  State  ZIP Code  City  Street  Schedule D, line  Schedule D, line  Schedule D, line  Schedule E/F, line  Schedule E/F, line  Schedule G, line	shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the credito Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you check all schedules that apply:  \[ \begin{array}{cccccccccccccccccccccccccccccccccccc	: person
shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the Check all schedules that apply:  n/a  Name  Schedule D, line  Schedule E/F, line  City  State  ZIP Code  City  Street  Schedule D, line  Schedule G, line	Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom y Check all schedule B, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F	person
Name  Schedule D, line  Schedule E/F, line  Schedule G, line  City  State  ZIP Code  Schedule D, line  Schedule D, line  Schedule D, line  Schedule E/F, line  Schedule E/F, line  Schedule G, line  Schedule G, line	Schedule D, line   Schedule E/F, line     Number   Street   Schedule G, line	ou owe the c
Number Street  City State ZIP Code  Name  Schedule E/F, line  Schedule G, line  Schedule D, line  Schedule E/F, line  Schedule E/F, line  Schedule G, line  Schedule G, line  Schedule G, line	Schedule E/F, fine   Schedule G, line   Schedule G, line   Schedule G, line   Schedule D, line   Schedule E/F, line   Schedule E/F, line   Schedule E/F, line   Schedule G, line   Schedule G, line   Schedule G, line   Schedule D, line   Schedule D, line   Schedule D, line   Schedule D, line   Schedule E/F, line   Schedule	
Number         Street         ☐ Schedule G, line           City         State         ZiP Code           Name         ☐ Schedule D, line         ☐ Schedule E/F, line           Number         Street         ☐ Schedule G, line           City         State         ZiP Code	Number         Street         Schedule G, line           City         State         ZIP Code           Name         Schedule D, line         Schedule E/F, line           Number         Street         Schedule G, line           City         State         ZIP Code           Name         Schedule D, line           Name         Schedule E/F, line	
Schedule G, line	Schedule G, line	
Name  Schedule D, line  Schedule E/F, line  Number Street  Schedule G, line  City State ZIP Code	Name         □ Schedule D, line           Number         Street           City         State         ZIP Code           Name         □ Schedule D, line           Schedule E/F, line         □ Schedule E/F, line	
Number Street State ZIP Code Schedule E/F, line Schedule G, line ZIP Code	Number Street Street State Street Street Street Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line	
Number Street State ZIP Code Schedule E/F, line Schedule G, line ZIP Code	Number Street Street State State Street Street Street Street Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, lin	
City State ZIP Code	City State ZIP Code  Name Schedule D, line  Schedule E/F, line	
The second secon	Name Schedule D, line Schedule E/F, line	
Cohadula D. Bas	Schedule E/F, line	
	□ Schedule E/F, line	
traine		
	Number Street	
Number Street Schedule G, line	Schedule G, line	

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Fill in this in	formation to identif	A AORL CASO.			
	Demetric	y your case.			
Debtor 1	First Name	L. Middle Name	Renix Last Name	·	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	sankruptcy Court for the	: Northern District of Illinois	Cost Name		
Case number	and a proof of the control of the	. Trotatetti Diotrict of miriolo			
(If known)					c if this is:
					amended filing
<b></b> –				inc	supplement showing postpetition chapter 13 come as of the following date:
Official Fo		•			I / DD / YYYY
Sched	ule I: Yo	ur Income			12/15
If you are sepa separate sheet	rated and your sno	use is not filing with you, one top of any additional pag	do not leek de l	Your spouse is living Wi	ebtor 2), both are equally responsible for ith you, include information about your spous spouse. If more space is needed, attach a (if known). Answer every question.
Fill in your of information	employment i.		Debtor 1		Debtor 2 or non-filing spouse
If you have r	more than one job, arate page with				9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
information a	arate page with about additional	Employment status	<b>☑</b> Employed		☐ Employed
employers.			☐ Not emplo	yed	☐ Not employed
self-employe	time, seasonal, or ed work.				
Occupation or homemak	may include student er, if it applies.	Occupation	Sales Assoc	iate	
		Employer's name	Walmart		
		Employer's address	4005 167th	C+	
		,,	Number Street		Number Street
			*****		
			Country Clul	b Hil IL 60478	
			City	State ZIP Code	City State ZIP Code
		How long employed there	? <u>1 Yr</u>	•	<u>1 Yr</u>
Part 2: Gi	ve Details About	Monthly Income			
	o you are ocparated.				write \$0 in the space. Include your non-filing
If you or your below. If you	non-filing spouse ha need more space, at	ve more than one employer, tach a separate sheet to this	combine the info form.	ormation for all employers	s for that person on the lines
)				For Debtor 1	For Debtor 2 or non-filing spouse
deductions).	y gross wages, sala If not paid monthly, o	ory, and commissions (befo calculate what the monthly w	ore all payroll vage would be.	<sup>2.</sup> \$ 1,249.00	\$
. Estimate an	d list monthly overt	ime pay.		3. + \$ 0.00	+ \$
	oss income. Add lin				

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Debtor 1	Demetric First Name	Middle Name	Last Name	Renix		C	ase number (	if known)	······································				
	1,441			The second secon	t de la companya	Foi	Debtor 1		For Del	otor 2 or			
Cop	y line 4 here				<b>→</b> 4.	\$_	1,249.00	0	\$		*		
5. List	all payroll deduct	ions:						•••	·		•		
	Tax, Medicare, a		IFity doductions		P* _		444.04	^					
	Mandatory contr				5a.		114.00						
	Voluntary contril				5b. 5c.	\$ \$	0.00	_					
:	Required repaym				5d.	Ψ \$	0.00	******					
!	Insurance				5e.	\$	130.00	_					
5f.	Domestic support	rt obligations			5f.	\$	0.00	****					
<b>5</b> g.	Union dues				5g.	\$	0.00	_ )	_	<del></del>			
5h.	Other deductions	s. Specify: <u>San</u>	ns Advance Ca	ard	5h.	+\$	61.00	_ } .	+ s	1711			
6. <b>Ad</b>	i the payroll dedu	ctions. Add line	es 5a + 5b + 5c +	5d + 5e +5f + 5g + 5h		\$	305.00	-	· • • • • • • • • • • • • • • • • • • •				
7. <b>Cal</b>	culate total month	nly take-home	pay. Subtract line	6 from line 4.	7.	\$	944.00	<u>)</u>	\$				
8. List	all other income i	egularly recei	ved:										
8a.	Net income from profession, or far	rental property	and from opera										
	Attach a statement receipts, ordinary a monthly net income	and necessary l	rty and business ousiness expense	showing gross s, and the total	8a.	\$	0.00	_	\$				
8b.	Interest and divid	ends			8b.	æ	0.00	_	•				
8c.	Family support pa regularly receive	ayments that y	ou, a non-filing s	spouse, or a depende		Ψ		•	Ψ				
:	Include alimony, sp settlement, and pro	ousal support, operty settlemer	child support, mai nt.	intenance, divorce	8c.	\$	0.00	-	\$				
	Unemployment co	ompensation			8d.	\$	0.00		\$				
	Social Security				8e.	\$	0.00		\$				
 	Other governmen include cash assist that you receive, so Nutrition Assistance Specify: S.N.A.P	ance and the valich as food star e Program) or h	alue (if known) of	any non-cash assistar		¢.	639.00						
					8f.	Φ	638.00		\$	***************************************			
	Pension or retiren		4		8g.	\$	0.00		\$				
8h. (	Other monthly inc	ome. Specify: _	n/a		8h.	+ \$	0.00		+ \$				
	all other income.			+ 8f +8g + 8h.	9.	\$	,582		\$				:
o. Calcu Add tl	late monthly inco he entries in line 10	me. Add line 7 ) for Debtor 1 a	+ line 9. nd Debtor 2 or no	n-filing spouse.	10.	\$ <u>\$</u>	<u>,582</u>	+	\$	0.00	<b>=</b> [s_	1,58	32.00
Includ	all other regular of the contributions from s or relatives.	contributions t m an unmarried	o the expenses to partner, member	that you list in Scheo s of your household, y	<i>dule J.</i> /our de	penden	its, your roo	mmal	es, and o	other		***	
Do no Speci	et include any amou <sub>fy:</sub> S.N.A.P.	ınts already inc	luded in lines 2-10	or amounts that are	not ava	ilable t	o pay exper	nses li	sted in S	chedule J.	<b>.</b> c		0.00
2. <b>Add t</b> Write	he amount in the that amount on the	last column of	line 10 to the an our Assets and Li	nount in line 11. The abilities and Certain S	result i	s the co	ombined mo	onthly applie	income. s	12.	\$_ Coi	1,58	2.00
<b>₩</b> N	io.	ease or decrea	se within the yea	ar after you file this f	orm?						mo	nthly inc	ome
☐ Y	es. Explain:												

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Fill in th	is information to identi	ify your case;					
Debtor 1	Demetric	L Renix					
	First Name	Middle Name Last Nam		Check if this is:			
Debtor 2 (Spouse, if	filing) First Name	Middle Name Last Nam	e	An amended	•		
United Sta	ates Bankruptcy Court for th	e: Northern District of Illinois			nt showing pos of the followin	tpetition chapter 13	
Case num	nber			MM / DD / YY		g date.	
	MARKALLA JAMES L						
	l Form 106J	_					
Sche	edule J: Yo	our Expenses				12/15	
informatio	nplete and accurate as on, If more space is nee . Answer every questio	possible. If two married people are ded, attach another sheet to this f on.	filing together, b orm. On the top of	oth are equally respor f any additional pages	isible for supply , write your nam	ring correct ne and case number	
Part 1:	Describe Your Ho	ousehold					
1. Is this a	joint case?						
	Go to line 2.  Does Debtor 2 live in a	ı separate household?					
	□ No						
t halling the following the state of the sta	Yes. Debtor 2 must	file Official Form 106J-2, Expenses for	or Separate Housel	hold of Debtor 2.	erikka a katili (pira ( (katilis i m 1 Apopak a pilopina ya ya 1900 a 11 a 1900 a 1	T I FACISET TILL FROM BATH MARK of Physics and Spirits required to the SPART LINE OF THE SPART AND A STATE OF THE SPART A	
	have dependents?	□ No	Dependent's re	elationship to	Dependent's	Does dependent live	
Do not lis Debtor 2	st Debtor 1 and	Yes. Fill out this information feach dependent	Or Debtor 1 or De		age	with you?	
Do not st	ate the dependents'		Son		***************************************	□ No ☑ Yes	
			Son			□ No	
						☑ Yes	
					AMARIA MANAGAMANA MANAGAMA	☐ No ☐ Yes	
						□ No	
			b-,1		***************************************	Yes	
						□ No □ Yes	
expense	expenses include s of people other than and your dependents?	☑ No ☐ Yes	AAVA				
Part 2:	Estimate Vour Onco	ping Monthly Expenses	no MAN Anna paggara a 1 S. a ang matawa a 1 S. a ang matawa a	19 karl Mille december e enemgin franskingspelaren og se enemgelsfyre en er og kjelsfil fil en december en	and Area Sarra and Company of the Area Area and a second	and the second section of the section of t	
		r bankruptcy filing date unless you	Laro using this fo	rm as a supplement in	a Chapter 13 a	and to report	
	s of a date after the ba	nkruptcy ining date thiess you nkruptcy is filed. If this is a supple					
Include exp	enses paid for with no	n-cash government assistance if y	ou know the value	e of			
such assist	ance and have include	d it on Schedule I: Your Income (O	fficial Form 106l.)		Your exper	ISES	
	al or home ownership for the ground or lot.	expenses for your residence. Inclu	de first mortgage p	ayments and 4.	\$	750.00	
	cluded in line 4:					0.00	
	al estate taxes			4a.	\$	0.00	
	perty, homeowner's, or r			4b.	\$	0.00	
	me maintenance, repair,	, ,		4c.	\$	<u>0.00</u> 0.00	
4d. Hor	neowner's association o	r condominium dues		4d.	\$	0.00	

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Debtor 1 Demetric L Renix
First Name Middle Name Last Name

Case number (if known)

			Your exp	oenses
!	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	5. Utilities:			
	6a. Electricity, heat, natural gas	6a.	¢	75.00
	6b. Water, sewer, garbage collection	6b.	φ	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	40000
	6d. Other. Specify:	6d.	\$	0.00
7		7.	\$	250.00
8	Childcare and children's education costs	8.	\$	100.00
9	Clothing, laundry, and dry cleaning	9.	\$	=
10	Personal care products and services	10.	\$	75.00
11.	Medical and dental expenses	11.	\$	0.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.		ę.	100.00
12		12.	Ψ	
13. 14.	tication, newspapers, magazines, and books	13.	\$	75.00
	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	60.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other, Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ıe.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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De	btor 1	Demetric First Name	Middle Name	Last Name	Renix	1	Case number (if known)		
21.	Oth	er. Specify:					21.	<b>+</b> \$	0.00
22.	Calc	culate your mon	thly expenses.						
	22a.	Add lines 4 thro	ugh 21.				22a.	\$	1,635.00
	22b.	Copy line 22 (m	onthly expenses	for Debtor 2), if a	any, from Official Forr	m 106J-2	22b.	\$	0.00
	22c.	Add line 22a an	d 22b. The resul	t is your monthly a	expenses.		22c.	\$	1,635.00
23.	Calcu	ılate your monti	hly net income					Model a compagning of the Secretary St. Sales and St. Sales and Sec.	
				onthly income) fro	m <i>Schedule I.</i>		23a.	\$	1,582.00
2	23b.	Copy your mont	thly expenses fro	om line 22c above	ı.		23b.	<b>-</b> \$	1,635.00
2				from your month	ly income.				50.00
		The result is you	ır monthly net in	come.			23c.	\$	-53.00
24.	Do yo	u expect an inc	rease or decre	ase in vour expe	nses within the year	r after vou file	this form?		
ſ	or ex	ample, do you e	xpect to finish p	aying for your car	loan within the year on modification to the t	or do you expe	ct your		
	<b>Z</b> No								
	] Yes	s. Explain he	ere:		Ammerica ( Sath Chairle Contact America ( Sanday 2003) Contact America ( Sanday 2003)	TO THE MET A STATE OF THE PARTY OF THE STATE	Annual de la companya de destrucción de la companya	APA-A-A-Pa	- Administration of the Section of Administration of the Section o
									A AV . CASA

Case 16-16173 Doc 1 Filed 05/12/16 Entered 05/12/16 15:49:59 Desc Main Document Page 39 of 53 Fill in this information to identify your case: Demetric Debtor 1 Renix Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number ☐ Check if this is an amended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Yes. Name of person\_ Veronica Eason , Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2

Date MM / DD / YYYY

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Case number (If known)	Bankruptcy Court for the:	L Middle Name  Middle Name  Northern District o	Renix Last Name Last Name		
(Spouse, if filing United States Case number (If known)	Bankruptcy Court for the:	Middle Name	Last Name		
United States  Case number (If known)	Bankruptcy Court for the:				
Case number (If known)		7 70 11 70 71 2 70 11 12 70	f Illinois		
			i minois		
Official I					Check if this is a amended filing
Official I					sooo ming
	Form 107				
		ncial Affai	irs for Indiv	viduals Filing for Bankruptc	M 040
e as comple	te and accurate as po	ssible. If two mar	ried people are filin	or together, both are equally responsible for supply	·
	If more space is need own). Answer every o	icu, atlacii a sebai	rate sheet to this for	rm. On the top of any additional pages, write your n	ame and case
Part 1: 0	ive Details About	Your Marital Sta	atus and Where Y	ou Lived Before	
1. What is y	our current marital st	atus?			
☐ Marrie	ed				
🗹 Not m					
☑ No ☐ Yes. L	e last 3 years, have your ist all of the places you tor 1:				Dates Debtor 2
	•		lived there	55.00	lived there
				Same as Debtor 1	☐ Same as Debtor 1
Nun	ber Street		From		From
, ven	ioei Gireet		То	Number Street	То
City		State ZIP Code	-	City State ZIP Code	
				☐ Same as Debtor 1	Same as Debtor 1
			From		From
Num	ber Street		To	Number Street	То
City		State ZIP Code		City State ZIP Code	
Within the	look 9 years alial yey				
states and	territories include Arizo	ever live with a sp ona, California, Idah	iouse or legal equiv io, Louisiana, Nevad	ralent in a community property state or territory? (C a, New Mexico, Puerto Rico, Texas, Washington, and N	ommunity property Nisconsin.)
☐ No ☑ Yes. M	.)				
Tes. M.	ake sure you fill out Sc.	neaule H: Your Cod	reptors (Official Form	1 7U6H).	

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Debtor 1	Demetric L		Renix		Case ni	imber (if known)	
	First Name Middle Name L	ast Name					
lf y	I you have any income from employm in the total amount of income you receiv ou are filing a joint case and you have in No Yes. Fill in the details.	rea irc	m all lobs and all bus	inesses.	includina nart-ti	me activities	endar years?
		De	btor1			Debtor 2	
			urces of income eck all that apply.	Gross i (before exclusion	deductions and	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:		Wages, commissions, bonuses, tips Operating a business	\$	4,996.00	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
	For last calendar year:		Wages, commissions, bonuses, tips	\$		☐ Wages, commissions, bonuses, tips	<b>.</b>
	(January 1 to December 31, YYYY					Operating a business	· ·
	For the calendar year before that: (January 1 to December 31,	ם c	Wages, commissions, bonuses, tips Operating a business	\$		<ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>	\$
List e	bling and lottery winnings. If you are filin each source and the gross income from No						under Debtor 1.
lad Y	es. Fill in the details.	Det	dor 1			Debtor 2	
			rces of income cribe below.	each sou	eductions and	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	S.N	.A.P	5 5	638.00		\$
		**********		<u> </u>			\$
	For last calendar year:		\$		***************************************		\$
	(January 1 to December 31, YYYY)		\$ \$				\$\$
	For the calendar year before that: (January 1 to December 31,)		\$				\$
	YYYY						<b>\$</b>

Demetric

L

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Debtor 1 Demetric L Renix
First Name Middle Name Last Name Case number (if known)

	List Certain Payments You Made Be						
					<del></del>		
	er Debtor 1's or Debtor 2's debts primarily						
	Neither Debtor 1 nor Debtor 2 has primari "incurred by an individual primarily for a pers	onal, lattilly, of	Household D	Jrbose."			01(8) as
	During the 90 days before you filed for banks	ruptcy, did you	pay any credi	tor a total of \$	6,425* or mo	re?	
	☐ No. Go to line 7.				.,		
	Yes. List below each creditor to whom yo total amount you paid that creditor. child support and alimony. Also, do						
	* Subject to adjustment on 4/01/19 and every	/ 3 years after t	hat for cases	filed on or afte	s pankruptcy or the date of	case.	
Yes.	Debtor 1 or Debtor 2 or both have primaril	V consumer d	ahta				
ı	During the 90 days before you filed for bankri	untev did vocu	euis. Pav anv crodit	or o total at #0	200 0		
	No. Go to line 7.	opioy, aid you j	day any credit	n a total ol 20	ou or more?		
,							
`	Yes. List below each creditor to whom you creditor. Do not include payments fo alimony. Also, do not include payme	t Hamberic chr	かかけ へわじゅっちゃ		1 -1	paid that nd	
		Dates of payment	Total amou	int paid	Amount you	still owe	Was this payment fo
	Creditor's Name		\$	0.00	\$	0.00	☐ Mortgage
	Creunor's Marine						Car
	Number Street						
	Number Street						Credit card
	Number Street						Loan repayment
							☐ Loan repayment☐ Suppliers or vendo
	Number Street  City State ZIP Code						☐ Loan repayment☐ Suppliers or vendo
							☐ Loan repayment☐ Suppliers or vendo
			\$	0.00	· · · · · · · · · · · · · · · · · · ·	0.00	Loan repayment Suppliers or vendo Other
	City State ZIP Code		\$	0.00 \$		0.00	Loan repayment Suppliers or vendo Other  Mortgage
	City State ZIP Code		\$	0.00	· · · · · · · · · · · · · · · · · · ·	0.00	Loan repayment  Suppliers or vendo Other  Mortgage Car
	City State ZIP Code  Creditor's Name		\$	0.00	 5	0.00	Loan repayment Suppliers or vendo Other Mortgage Car Credit card
	City State ZIP Code  Creditor's Name		\$	0.00		0.00	Loan repayment  Suppliers or vendo  Other  Mortgage  Car  Credit card  Loan repayment
	City State ZIP Code  Creditor's Name  Number Street		\$	0.00	5 <u>.</u>	0.00	Loan repayment Suppliers or vendo Other  Mortgage Car Credit card Loan repayment Suppliers or vendo
	City State ZIP Code  Creditor's Name		\$	0.00	5 <u></u>	0.00	Loan repayment Suppliers or vendo Other  Mortgage Car Credit card Loan repayment Suppliers or vendo
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	City State ZIP Code  Creditor's Name  Number Street						Loan repayment Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other  Other
	City State ZIP Code  Creditor's Name  Number Street  City State ZIP Code						Loan repayment Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other  Mortgage
	City State ZIP Code  Creditor's Name  Number Street  City Slate ZIP Code						Loan repayment Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other  Mortgage Car Credit card Credit card Credit card
	City State ZIP Code  Creditor's Name  Number Street  City State ZIP Code						Loan repayment Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Cother Loan Cother Loan Cother Loan Card Loan Card Loan Card Loan Card
	City State ZIP Code  Creditor's Name  Number Street  City State ZIP Code						Loan repayment Suppliers or vendo Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other  Mortgage Car Credit card Credit card Credit card

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ebtor 1	Demetric First Name Middle	Name Last Name	Renix	<del></del>		Case number (i	(if known)
corporager such	fers include your relative orations of which you a it, including one for a but as child support and a No	es; any general partner re an officer, director, p usiness you operate as limony.	s; relatives of any erson in control, o	general or owner	partners; p of 20% or r	artnerships of more of their v	yone who was an insider?  of which you are a general partner;  voting securities; and any managing  ents for domestic support obligations,
□ Y	es. List all payments to	o an insider.	Dates of payment	Total paid	amount	Amount you	u still Reason for this payment
	Insider's Name			\$	0.00	\$ <u>C</u>	0.00
	Number Street						***************************************
	City	State ZIP Code	······································	\$	0.00	ς Λ	0.00
	Insider's Name			<u> </u>		s <u>_</u>	<u></u>
	Number Street						
į	City	State ZIP Code					
an ins Includ	sider? le payments on debts g	guaranteed or cosigned	by an insider.				rty on account of a debt that benefited
			Dates of payment	paid	amount	Amount you owe	still Reason for this payment Include creditor's name
ī	nsider's Name		***************************************	\$	0.00	\$0.	.00
7	Number Street						
7	Dity	Stale ZIP Code					
	···			\$	0.00	e 0.4	00
Ī	nsider's Name			Φ	0.00_	Ψ	.00
N	lumber Street						
_	iitv	State ZIP Code					

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btor 1	Demetric  First Name Middle Name	L	Renix	Case num	ber (if known)	
	First Name Middle Name	Last Name			( in this wife	
art 4	,g					
With	in 1 year before you filed fo	or bankruptcy, w	ere you a party in any	/ lawsuit, court action,	or administrative proce	eding?
431 0	Il such matters, including pe contract disputes.	rsonal injury case:	s, small claims actions	, divorces, collection su	its, paternity actions, supp	port or custody modificat
<b>y</b> N						
	es. Fill in the details.					
	oct in in the details.	\$1-4.	· .	San San Agricultura		
			re of the case	Court or agen	су	Status of the case
(	Case title	: :				Pending
	***************************************			Court Name		_
-				N		On appeal
,	Case number			Number Street		Concluded
`	,ase number			City	State ZIP Code	***************************************
	en e				State Zir Code	
_	None siste					
	Case title			Court Name		Pending
						On appeal
				Number Street		Concluded
C	ase number					
				City	State ZIP Code	
	s. Fill in the information belo	w,	Describe the prope	ertv	Date	Value of the property
					Date	value of the property
					The second secon	\$ 0.00
	Creditor's Name				***************************************	\$
				and the second section of the content of the second content of the second content of the second content of the	an matrix of months franchist to a track to the	
	Number Street		Explain what happe	ened		
				repossessed.		
			Property was			
	444		Property was			
	City S	State ZIP Code	Property was	attached, seized, or lev	ied.	especial confidence in the second contracting and contracting and contracting
			Describe the prope	rty V N N N N N N N N N N N N N N N N N N	Date	Value of the property
			\$			
			!			\$0.00
	Creditor's Name		i i			
			_			
	Number Street		Explain what happe	ned		
			Property was	topopopos a d		
			□ Property was □ Property was			
			Property was			
	City S	late ZIP Code		attached, seized, or levi	ed.	

	Case 16-16173 Demetric	Doc 1	Filed 05/12/16	Entered 05/12/16 15:49: Page 45 of 53	Ja Des	c Main	
otor 1	First Name Middle Name	L	Document Renix	Case number (if known)			
	modic reality	Las	it Name	Case Humber (if known)			
. Withi	n 90 days before you filed	for bankru	inter did any are dis-				
acco	unts or refuse to make a p	ayment be	cause you owed a dehi	including a bank or financial institutions:	on, set off ar	y amounts fr	om your
M No	0		y and and an accompany	••			
<b>□</b> Y <sub>€</sub>	es. Fill in the details.						
			Describe the action th	e creditor took	Date action	Amount	
Cre	editor's Name				was taken		
PYUI	nber Street			TO CONTRACT OF THE CONTRACT OF		\$	0.00
City	State	ZIP Code	Last 4 digits of account	* m			
			Last 4 digits of accour	· · · · · · · · · · · · · · · · · · ·			
Vithin	1 year before you filed for	· bankruptc	V. Was any of your nea	manufacture to the			
redito	ors, a court-appointed rece	iver, a cus	todian, or another offic	perty in the possession of an assigne	e for the ber	nefit of	
<b>⊿</b> No			and an amount of the	oral :			
☐ Yes	i e						
5:	List Certain Gifts and	Contributi	ions				
		-					
	years before you filed for				**************************************		
	? years before you filed for			ts with a total value of more than \$600	) per person	?	
ithin 2		r bankruptc		ts with a total value of more than \$600	) per person	?	
/ithin 2	Years before you filed for Fill in the details for each g	r bankruptc		ts with a total value of more than \$600	) per person	?	
/ithin 2 No Yes.	Fill in the details for each g	r bankruptc ift.	ey, did you give any gif				
ithin 2 No Yes.		r bankruptc ift.			ates you gave		
ithin 2 No Yes.	Fill in the details for each g	r bankruptc ift.	ey, did you give any gif				
ithin 2 No Yes. Gift per	Fill in the details for each g s with a total value of more th person	r bankruptc ift.	ey, did you give any gif		ates you gave		
ithin 2 No Yes. Gift per	Fill in the details for each g	r bankruptc ift.	ey, did you give any gif		ates you gave		0.00
ithin 2 No Yes. Gift per	Fill in the details for each g s with a total value of more th person	r bankruptc ift.	ey, did you give any gif		ates you gave	Value	
ithin 2 No Yes. Gift per	Fill in the details for each g s with a total value of more th person	r bankruptc ift.	ey, did you give any gif		ates you gave	Value	0.00
ithin 2 No Yes. Gift per	Fill in the details for each g s with a total value of more th person n to Whom You Gave the Gift	r bankruptc ift.	ey, did you give any gif		ates you gave	Value	
No Yes. Gift per	Fill in the details for each g s with a total value of more th person n to Whom You Gave the Gift	r bankruptc ift.	ey, did you give any gif		ates you gave	Value	
No Yes.  Gift per  Person	Fill in the details for each g s with a total value of more th person n to Whom You Gave the Gift	r bankruptc ift.	ey, did you give any gif		ates you gave	Value	
No Yes. Gift per	Fill in the details for each g s with a total value of more th person to Whom You Gave the Gift  T Street	r bankruptc ift.	ey, did you give any gif		ates you gave	Value	
No Yes. Gift per Person Number	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  r Street	r bankruptc ift.	ey, did you give any gif		ates you gave	Value	
No Yes.  Gift per  Person  Rumbe	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  T Street  State Zif	r bankruptc ift.	ey, did you give any gift  Describe the gifts		ates you gave	Value	
No Yes.  Gift per  Person  City  Person  Gifts w	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zif s's relationship to you	r bankruptc ift.	ey, did you give any gif	L ti	ates you gave	Value	
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Number City Person Gifts w	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zif s's relationship to you  with a total value of more than rson	r bankruptc ift.	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	0.00
Number City Person Gifts w	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zif s's relationship to you	r bankruptc ift.	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	
Person City Person Gifts w	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zif s's relationship to you  with a total value of more than rson	r bankruptc ift.	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	0.00
Person City Person Gifts w	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zif s's relationship to you  with a total value of more than rson	r bankruptc ift.	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	0.00
Person Gifts we per per	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zii s's relationship to you  with a total value of more than rson  to Whom You Gave the Gift	r bankruptc ift.	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	0.00
Person City Person Gifts w	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zif s's relationship to you  with a total value of more than rson	r bankruptc ift.	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	0.00
Person Gifts w per per	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zii s's relationship to you  with a total value of more than rson  to Whom You Gave the Gift	r bankruptc ift.	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	0.00
Person Gifts we per per	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zii s's relationship to you  with a total value of more than rson  to Whom You Gave the Gift	r bankruptc  ift.  pan \$600  \$600  D	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	0.00
No Yes.  Gift per  Person  City  Person  Gifts we per per  Person to	Fill in the details for each g s with a total value of more th person  to Whom You Gave the Gift  State Zif s's relationship to you  with a total value of more than rson  to Whom You Gave the Gift  Street	r bankruptc  ift.  pan \$600  \$600  D	ey, did you give any gift  Describe the gifts	L ti	ates you gave	Value \$	0.00

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tor 1	Demetric First Name	Middle Name	L	Renix	Case number (if known	n)		
			430	T Tourie				
With	nin 2 years before	you filed	l for bankru	ptcy, did you give any g	gifts or contributions with a total va	alue of more than \$	600 to any chai	ritv?
	No Yes. Fill in the deta						·	
	Gifts or contributio that total more than	ns to char 1 \$600	ities	Describe what you cont	tributed	Date you contributed	Value	
ō	Charity's Name		AMAN, The Control of	-			\$	0.00
							\$	0.00
N	lumber Street		Control of the Contro				Ψ	
	<b>U</b>							
c	ity State	ZIP Code				3		
t 6:	List Certain	1						
	Describe the proper how the loss occurr			Describe any insurance include the amount that in claims on line 33 of Scheool	nsurance has paid. List pending insurance	Date of your loss	Value of prope lost	н
							\$	0.00
7:	1			Assessed the second of the sec	and the control of th			
	E MIOS VGILDIII (	avment	s or Trans					
ou conclude octudents	n 1 year before yo onsulted about so e any attorneys, bo	ou filed for eeking ba ankruptcy	ankruptcy o	sfers cy, did you or anyone els r preparing a bankruptc	se acting on your behalf pay or tra cy petition? ng agencies for services required in y	-	to anyone	
ou coud iclud No 1 Ye	n 1 year before yo onsulted about so le any attorneys, ba	ou filed for eeking ba ankruptcy	or bankrupto ankruptoy o petition prep	efers  cy, did you or anyone else r preparing a bankrupto parers, or credit counseling  Description and value of	ey petition?  Ing agencies for services required in y  any property transferred	-	to anyone  Amount of payr	nent
DU Colored Col	n 1 year before yo onsulted about so le any attorneys, ba o es. Fill in the details fidwest Consul	ou filed for eeking ba ankruptcy s.	or bankrupto ankruptoy or petition prep roup Inc.	sfers  cy, did you or anyone els r preparing a bankruptc parers, or credit counselin	ey petition?  Ing agencies for services required in y  any property transferred	Date payment or transfer was	Amount of payr	ment ).00
OU Concluding No. 21 Yes	n 1 year before yo onsulted about so le any attorneys, bo es. Fill in the details fidwest Consul erson Who Was Paid 212 S. Stony Is	ou filed for seeking ba ankruptcy s. tants Gi sland Av	or bankrupto ankruptoy or petition prep roup Inc.	efers  cy, did you or anyone else r preparing a bankrupto parers, or credit counseling  Description and value of	ey petition?  Ing agencies for services required in y  any property transferred	Date payment or transfer was made	Amount of payr	
Months of the second of the se	n 1 year before yoonsulted about so le any attorneys, but the details of the second se	ou filed for seeking ba ankruptcy s. tants Gi sland Av	r bankrupto ankruptoy of petition prep roup Inc. /e.	efers  cy, did you or anyone else r preparing a bankrupto parers, or credit counseling  Description and value of	ey petition?  Ing agencies for services required in y  any property transferred	Date payment or transfer was made	Amount of payr	00.0

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$eq:control_co$		The state of the s	t of the State of Contract of the State of t
004 D 14	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
001 Debtor Inc. Person Who Was Paid	Credit Counseling		
372 Summit Ave.	-		\$
Number Street			Ψ
	-		\$
Jersey City NJ 07306 City State ZIP Code	•	***************************************	
Side Zii Gode			
WWW.debtorcc.org Email or website address			
- Totalia dadi 655			
Person Who Made the Payment, if Not You			
Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of pa
reison who was raid			
Number Street			\$
Number Street			\$
City State ZIP Code in 2 years before you filed for bankrup	otcy, did you sell, trade, or otherwise transfer any property to	o anyone, other tha	\$
City State ZIP Code  in 2 years before you filed for bankrup sferred in the ordinary course of your be de both outright transfers and transfers mot include gifts and transfers that you hav	business or financial affairs?  nade as security (such as the granting of a security interest or m  re already listed on this statement.	ortgage on your prop	\$on property
City State ZIP Code in 2 years before you filed for bankrup sferred in the ordinary course of your bankrup	business or financial affairs? nade as security (such as the granting of a security interest or m	ortgage on your prop	\$
City State ZIP Code  in 2 years before you filed for bankrup eferred in the ordinary course of your be de both outright transfers and transfers mo of include gifts and transfers that you hav to es. Fill in the details.	business or financial affairs?  nade as security (such as the granting of a security interest or m  re already listed on this statement.  Description and value of property  Describe any property	ortgage on your prop	\$on property perty).
City State ZIP Code in 2 years before you filed for bankrup iferred in the ordinary course of your it de both outright transfers and transfers m ot include gifts and transfers that you hav o es. Fill in the details.	business or financial affairs?  nade as security (such as the granting of a security interest or m  re already listed on this statement.  Description and value of property  Describe any property	ortgage on your prop	\$on property perty).
City State ZIP Code in 2 years before you filed for bankrup iferred in the ordinary course of your it de both outright transfers and transfers m ot include gifts and transfers that you hav o es. Fill in the details.	business or financial affairs?  nade as security (such as the granting of a security interest or m  re already listed on this statement.  Description and value of property  Describe any property	ortgage on your prop	\$on property perty).
City State ZIP Code in 2 years before you filed for bankrup sferred in the ordinary course of your k de both outright transfers and transfers m ot include gifts and transfers that you hav o es. Fill in the details.  Person Who Received Transfer	business or financial affairs?  nade as security (such as the granting of a security interest or m  re already listed on this statement.  Description and value of property  Describe any property	ortgage on your prop	\$on property perty).
City State ZIP Code  in 2 years before you filed for bankrup aferred in the ordinary course of your be de both outright transfers and transfers mo of include gifts and transfers that you hav lo es. Fill in the details.  Person Who Received Transfer  Number Street	business or financial affairs?  nade as security (such as the granting of a security interest or m  re already listed on this statement.  Description and value of property  Describe any property	ortgage on your prop or payments received ge	\$on property perty).
City State ZIP Code  in 2 years before you filed for bankrup iferred in the ordinary course of your it de both outright transfers and transfers mot include gifts and transfers that you hav o es. Fill in the details.  Person Who Received Transfer  Jumber Street  City State ZIP Code  Person's relationship to you	business or financial affairs?  nade as security (such as the granting of a security interest or move already listed on this statement.  Description and value of property property or debts paid in exchants.	ortgage on your prop or payments received ge	\$on property perty).
City State ZIP Code  in 2 years before you filed for bankrup sferred in the ordinary course of your to de both outright transfers and transfers mo ot include gifts and transfers that you hav lo es. Fill in the details.  Person Who Received Transfer  Number Street	business or financial affairs?  nade as security (such as the granting of a security interest or move already listed on this statement.  Description and value of property property or debts paid in exchants.	ortgage on your prop or payments received ge	\$on property perty).

Case 16-16173 Doc 1 Filed 05/12/16 Entered 05/12/16 15:49:59 Desc Main Document Page 48 of 53 Demetric Debtor 1 Renix Case number (if known) First Name 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ☑ No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. M No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Name of Financial Institution ☐ Checking XXXX-0.00 Savings Number Street ☐ Money market ☐ Brokerage State ZIP Code Other\_ ☐ Checking 0.00 Name of Financial Institution Savings Number Street ☐ Money market ☐ Brokerage Other State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? **V** No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? ☐ No Name of Financial Institution Yes Name Number Street Number Street City State ZIP Code

City

State

ZIP Code

Entered 05/12/16 15:49:59 Case 16-16173 Doc 1 Filed 05/12/16 Desc Main Page 49 of 53 Document Demetric Debtor 1 Renix Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ☐ Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? ☐ No Name of Storage Facility Yes Number Street Number Street City State ZIP Code State ZIP Code Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. ☑ No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name 0.00 Number Street Number Street ZIP Code City State ZIP Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☑ No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street

City

State

ZIP Code

State ZIP Code

City

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or 1	Demetric First Name		L Renix	Case numb	OP (Klasson)	
	Flist Martie	Middle Name	Last Name	Oddo Hame	ici (a kilowa)	
		ıy governmen	tal unit of any release of hazardous mate	erial?		
السا	es. Fill in the d	etails.				
			Governmental unit	Environmental I	aw, if you know it	Date of notice
	Name of site		Governmental unit			
	Number Street				Plantage populations	
	Wallist Street		Number Street	<del></del>	The state of the s	PTall I med
	<del></del>			···		
			City State ZIP Code			
	City	State ZI	P Code			
ave	Vou been a nam	v in any judic	ial or administrative was a sufficient			
1 N	,	y arry jacit	ial or administrative proceeding under a	ny environmental	law? Include settlements and	orders.
	o es. Fill in the de	taile				
	or, in the de	tana,			i de la composición della comp	<u>.</u>
			Court or agency	Nature of th	e case	Status of the case
C	ase title			:		
			Court Name	<del></del> :		☐ Pending
						On appea
			Number Street	:		Conclude
Ca	ise number					
			City State ZIP Co	ode		•
111			our Business or Connections to An			
	A sole proprie A member of a A partner in a An officer, dire	tor or self-em <sub>l</sub> limited liabili partnership ector, or mana	pankruptcy, did you own a business or he ployed in a trade, profession, or other ac ty company (LLC) or limited liability part ging executive of a corporation	ctivity, either full-ti nership (LLP)	me or part-time	
	An owner of at	least 5% of the	ne voting or equity securities of a corpor	ation		
No	. None of the at	ove applies. (	Go to Part 12.			
			and fill in the details below for each bus	iness.		
			Describe the nature of the busines		Employer Identification number	•
Bi	usiness Name				Do not include Social Security i	number or ITIN.
					EIN:	
Nt	ımber Street					
			Name of accountant or bookkeepe	<b>r</b>	Dates business existed	
		······································			F T.	
Ci	ty	State ZIP (	lode		From To	
7.	• • • • •	<b> \</b>		:		_
Bu			Describe the nature of the busines.		Employer Identification number	_
	siness Name		The Marine Committee of the Committee of		Employer Identification number Do not include Social Security n	
	siness Name	, m-r	The Marine Committee of the Committee of		Do not include Social Security n	umber or ITIN.
Nu	siness Name		The Marine Committee of the Committee of			umber or ITIN.
Nü			The Marine Committee of the Committee of	S	Do not include Social Security n	umber or ITIN.
Nu			Describe the nature of the busines.	S	Do not include Social Security n	umber or ITIN.
Nu	mber Street		Describe the nature of the busines.	S	Do not include Social Security n	umber or ITIN.

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Debtor 1	Demetric First Name Mic	die Name La	Renix	Case number (if known)
	t not require With	iole Name La	sst Name	
111111111111111111111111111111111111111			Describe the nature of the business	Employer Identification number
	Business Name			Do not include Social Security number or ITIN.  EIN: -
	Number Street	<del></del>	Name of accountant or bookkeeper	Dates business existed
				From To
	City	State ZIP Code		Market Market Comments
28. With	nin 2 years before yo	ou filed for bankru	uptcy, did you give a financial statemer	nt to anyone about your business? Include all financial
inst 🗹	itutions, creditors, o	r other parties.		
	Yes. Fill in the detail	s below.		
			Date issued	
	Name		MM / DD / YYYY	
		·	<del>-</del>	
	Number Street			
			_	
	City	State ZIP Code	-	
	-19	211 0000		
Part 12	2 Sign Below			
FGIL 12	1 Olga Delow			
ans in c	wers are true and c	orrect. I understa: nkruptcy case ca	nt of Financial Affairs and any attachm nd that making a false statement, cond n result in fines up to \$250,000, or imp	ents, and I declare under penalty of perjury that the ealing property, or obtaining money or property by fraud risonment for up to 20 years, or both.
/	6.5.6. gg 132, 1341,	1319, and 3301.	,	
×	Signature of Debtor 1	WYZA	Signature of Debtor 2	The state of the s
	Date 5/1/20	Ko	Date	
	7,7	al pages to Your S		iduals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did i		pay someone wh	o is not an attorney to help you fill out	bankruptcy forms?
	No Yes. Name of person_		Veronica Eason	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this int	formation to ident	lify your case:		
Debtor 1	Demetric	L	Renix	
	First Name	Middle Name	Lasi Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for t	he: Northern District of II	linois	
	, ,			
Case number (If known)				
(ii kindiiri)				

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

## Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that		that Did you claim the property
Creditor's name: n/a	☐ Surrender the property.	No
Description of	Retain the property and redeem it.	☐ Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	DNo.
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
Ç	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	_ ,
,	Retain the property and [explain]:	_ /
Creditor's name:	☐ Surrender the property.	□ No
Control of the Contro	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	☐ Retain the property and [explain]:	******

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Debtor 1

D 42 -		Docament	Fage 33 01 33
Demetric	L	Renix	Case number (Himmun)
First Name	Middle Name	Last Name	Case number (If knowл)

Part 2:	List Your Unexpired Personal Property Leases
	The state of the s

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. 6 365(p)(2).

Lessor's name: Crescent Real Estate Management  Description of leased property:  Lessor's name: n/a  Description of leased property:  Lessor's name:  Description of leased property:  Lessor's name:  Description of leased property:	No Yes  No Pes  No Pes
Description of leased property:  Lessor's name:  Description of leased property:  Lessor's name:  Description of leased property:	No Yes
Description of leased property:  Lessor's name:  Description of leased property:	Yes No
Lessor's name: Description of leased property:	EJ No
Description of leased property:	
property:	☐ Yes
.essor's name:	
	more and the second
Description of leased property:	Yes
_essor's name:	Ū No
Description of leased property:	Yes
_essor's name:	☑ No
Description of leased property:	Yes
.essor's name;	
Description of leased property:	Yes
oroperty:  3: Sign Below	